

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Kleinhendler For Congress

ADDRESS (number and street) ▼

PO Box 1692



Check if different than previously reported. (ACC)

Brick

NJ

08723

2. FEC IDENTIFICATION NUMBER ▼

C

C00554311

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

NJ

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

05

D D / Y Y Y Y

15

Y Y Y Y

2014

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Howard Kleinhendler

Signature of Treasurer

Howard Kleinhendler

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

07

Y Y Y Y

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 19

Write or Type Committee Name

Kleinhendler For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	1000.00	1000.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1000.00	1000.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	49444.48	49444.48
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	49444.48	49444.48
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-30494.48	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	17950.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 19

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Kleinhendler For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

1000.00

1000.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

1000.00

1000.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

1000.00

1000.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

17950.00

17950.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

17950.00

17950.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ▶

18950.00

18950.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 19

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	49444.48	49444.48
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	49444.48	49444.48

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18950.00
25. SUBTOTAL (add Line 23 and Line 24).....	18950.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	49444.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	-30494.48

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 19

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

Isaac Meisels

Mailing Address 165 Taylor Street

City

Brooklyn

State

NY

Zip Code

11211

FEC ID number of contributing
federal political committee.

C

Name of Employer
priceless Resource IncOccupation
Electronics wholesaler

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2014

Transaction ID : SA11Al.4143

Amount of Each Receipt this Period

1000.00

campaign contribution

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 19

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

Howard Kleinhendler

A.

Mailing Address 8 Cabinfield Circle

City

Lakewood

State

NJ

Zip Code

08701

FEC ID number of contributing
federal political committee.

C

H4NJ03114

Name of Employer
Wachtel Missry LLP

Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

05

21

2014

Transaction ID : SA13A.4140

Amount of Each Receipt this Period

7000.00

Loan

Full Name (Last, First, Middle Initial)

Howard Kleinhendler

B.

Mailing Address 8 Cabinfield Circle

City

Lakewood

State

NJ

Zip Code

08701

FEC ID number of contributing
federal political committee.

C

H4NJ03114

Name of Employer
Wachtel Missry LLP

Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

12000.00

Date of Receipt

05

27

2014

Transaction ID : SA13A.4150

Amount of Each Receipt this Period

5000.00

Loan

Full Name (Last, First, Middle Initial)

Howard Kleinhendler

C.

Mailing Address 8 Cabinfield Circle

City

Lakewood

State

NJ

Zip Code

08701

FEC ID number of contributing
federal political committee.

C

H4NJ03114

Name of Employer
Wachtel Missry LLP

Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

12950.00

Date of Receipt

05

29

2014

Transaction ID : SA13A.4155

Amount of Each Receipt this Period

950.00

Loan

SUBTOTAL of Receipts This Page (optional).....

12950.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

Howard Kleinhendler**A.**

Mailing Address 8 Cabinfield Circle

City

Lakewood

State

NJ

Zip Code

08701

FEC ID number of contributing
federal political committee.**C**

H4NJ03114

Name of Employer
Wachtel Missry LLPOccupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

17950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2014

Transaction ID : SA13A.4162

Amount of Each Receipt this Period

5000.00

Loan

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5000.00

17950.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 19

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

A. Chris Coleman

Mailing Address 219 Reeves Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

City	State	Zip Code
Browns Mills	NJ	08015

Purpose of Disbursement
campaign work

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4138

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Full Name (Last, First, Middle Initial)

B. Chris Coleman

Mailing Address 219 Reeves Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
Browns Mills	NJ	08015

Purpose of Disbursement
campaign work

Amount of Each Disbursement this Period

1700.00

Transaction ID : SB17.4142

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Full Name (Last, First, Middle Initial)

c. Mortisha Coleman

Mailing Address 219 Reeves Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

City	State	Zip Code
Browns Mills	NJ	08015

Purpose of Disbursement
catering for campaign event

Amount of Each Disbursement this Period

1650.00

Transaction ID : SB17.4159

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4850.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 19

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

A. Jimmy Esposito

Mailing Address 381 Rose Court

City	State	Zip Code
Lakewood	NJ	08701

Purpose of Disbursement
campaign work

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4139

B. Jimmy Esposito

Mailing Address 381 Rose Court

City	State	Zip Code
Lakewood	NJ	08701

Purpose of Disbursement
campaign work

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4145

c. Jimmy Esposito

Mailing Address 381 Rose Court

City	State	Zip Code
Lakewood	NJ	08701

Purpose of Disbursement
campaign work

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

110.00

Transaction ID : SB17.4168

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2610.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 19

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

A. Facebook Inc

Mailing Address 1601 Willow Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
Menlo Park	CA	94025

Amount of Each Disbursement this Period

752.20

Purpose of Disbursement
campaign advertisingCategory/
Type**Transaction ID : SB17.4152**

Candidate Name

Kleinhendler For Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Full Name (Last, First, Middle Initial)

B. Facebook Inc

Mailing Address 1601 Willow Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2014

City	State	Zip Code
Menlo Park	CA	94025

Amount of Each Disbursement this Period

774.32

Purpose of Disbursement
campaign advertisingCategory/
Type**Transaction ID : SB17.4154**

Candidate Name

Kleinhendler For Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Full Name (Last, First, Middle Initial)

C. Facebook Inc

Mailing Address 1601 Willow Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Menlo Park	CA	94025

Amount of Each Disbursement this Period

217.98

Purpose of Disbursement
campaign advertisingCategory/
Type**Transaction ID : SB17.4163**

Candidate Name

Kleinhendler For Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1744.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 19

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

A. Gangi Graphics

Mailing Address 1669 Route 88 W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

City Brick	State NJ	Zip Code 08724
---------------	-------------	-------------------

Amount of Each Disbursement this Period

Purpose of Disbursement
campaign literature

3470.01

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Transaction ID : SB17.4158

Full Name (Last, First, Middle Initial)

B. Gangi Graphics

Mailing Address 1669 Route 88 W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City Brick	State NJ	Zip Code 08724
---------------	-------------	-------------------

Amount of Each Disbursement this Period

Purpose of Disbursement
campaign literature

3603.76

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Transaction ID : SB17.4166

Full Name (Last, First, Middle Initial)

c. Gangi Graphics

Mailing Address 1669 Route 88 W

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City Brick	State NJ	Zip Code 08724
---------------	-------------	-------------------

Amount of Each Disbursement this Period

Purpose of Disbursement
campaign literature

750.00

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Transaction ID : SB17.4167**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7823.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 19

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

A. Greenrose Media Inc

Mailing Address 9 Penny Lane

City	State	Zip Code
Bayville	NJ	08721

Purpose of Disbursement
campaign advertising

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4146

B. JL Media Inc.

Mailing Address 1600 Route 22

City	State	Zip Code
Union	NJ	07083

Purpose of Disbursement
campaign advertising

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

Amount of Each Disbursement this Period

14922.90

Transaction ID : SB17.4133

c. JL Media Inc.

Mailing Address 1600 Route 22

City	State	Zip Code
Union	NJ	07083

Purpose of Disbursement
campaign advertising

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

2121.25

Transaction ID : SB17.4151

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

18044.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 19

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

A. JL Media Inc.

Mailing Address 1600 Route 22

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2014

City	State	Zip Code
Union	NJ	07083

Amount of Each Disbursement this Period

4300.00

Transaction ID : SB17.4153Purpose of Disbursement
campaign advertising

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Full Name (Last, First, Middle Initial)

B. Steven Lerner

Mailing Address 80 West Veterans Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

City	State	Zip Code
Jackson	NJ	08527

Amount of Each Disbursement this Period

1100.00

Transaction ID : SB17.4165Purpose of Disbursement
campaign consulting

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Full Name (Last, First, Middle Initial)

c. US Postal Service

Mailing Address 475 L'Efant Plaza SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

City	State	Zip Code
Washington	DC	20260

Amount of Each Disbursement this Period

3853.53

Transaction ID : SB17.4136Purpose of Disbursement
Postage for campaign mailer

Candidate Name

Kleinhendler For CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9253.53

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 19

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kleinhendler For Congress

Full Name (Last, First, Middle Initial)

A. US Postal Service

Mailing Address 475 L'Efant Plaza SW

City	State	Zip Code
Washington	DC	20260

Purpose of Disbursement
postage for campaign mailer

Candidate Name

Kleinhendler For Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

3853.53

Transaction ID : SB17.4141

B. Voice Broadcasting Corp

Mailing Address 1527 S. Cooper St

City	State	Zip Code
Arlington	TX	76010

Purpose of Disbursement
campaign robocalls

Candidate Name

Kleinhendler For Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

850.00

Transaction ID : SB17.4156

c. Sandra Wood

Mailing Address 80 West Veterans Highway

City	State	Zip Code
Jackson	NJ	08527

Purpose of Disbursement
graphic design for campaign literature

Candidate Name

Kleinhendler For Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NJ District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

Amount of Each Disbursement this Period

210.00

Transaction ID : SB17.4147

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4913.53

SCHEDULE C (FEC Form 3)
LOANS

PAGE 16 OF 19

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4140

Kleinhendler For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Howard Kleinhendler

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
8 Cabinfield Circle

City

State

ZIP Code

Lakewood

NJ

08701

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

7000.00

0.00

7000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y
05

21

Y Y Y Y
2014M M / D D / Y Y
11/30/14

11/30/14

Y Y Y Y
11/30/14

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

7000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 17 OF 19

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4150

Kleinhendler For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Howard Kleinhendler

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
8 Cabinfield Circle

City

State

ZIP Code

Lakewood

NJ

08701

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
05

27

2014

M M / D D / Y Y Y Y

11/30/14

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 18 OF 19

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4155

Kleinhendler For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Howard Kleinhendler

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
8 Cabinfield Circle

City

State

ZIP Code

Lakewood

NJ

08701

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

950.00

0.00

950.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
05

29

2014

M M / D D / Y Y Y Y

11/30/14

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

950.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 19 OF 19

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4162

Kleinhendler For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Howard Kleinhendler

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
8 Cabinfield Circle

City

State

ZIP Code

Lakewood

NJ

08701

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 / 02 / 2014

M M / D D / Y Y Y Y

D D / Y Y Y Y

11/30/14

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS This Period (last page in this line only)..... ►

17950.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.